

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>1/11</i>	<i>70591</i>	<i>6/29</i>
O.I.P.E. CLASSIFIER		<i>49</i>	<i>2/5/00</i>
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		<i>69300</i>	

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	6-13-07
2	✓	✓	10-14-03
3	✓	✓	11-21-04
4	✓	✓	6-7-09
5	✓	✓	
6	✓	✓	
7	✓	✓	
8	✓	✓	
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If more than 150 claims or 10 actions  
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